UNITED
NATIONS

CRC

Convention on the
Rights of the Child

Distr.
GENERAL

CRC/C/SR.318
22 October 1996

ENGLISH
Original: ENGLISH

COMMITTEE ON THE RIGHTS OF THE CHILD

Thirteenth session

SUMMARY RECORD OF THE 318th MEETING

Held at the Palais des Nations, Geneva,
on Tuesday, 24 September 1996, at 3 p.m.

Chairperson: Mrs. BELEMBAOGO

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GE.96-18303 (E)

The meeting was called to order at 3.10 p.m.

CONSIDERATION OF REPORTS OF STATES PARTIES (agenda item 4) (continued)

Initial report of Morocco (continued) (HRI/CORE/1/Add.23 and CRC/C/28/Add.1; CRC/C/Q/MOR.1 (list of issues); written replies by the Government of Morocco with no document symbol, in English and French)

1. At the invitation of the Chairperson, the Moroccan delegation resumed its place at the Committee table.

2. The CHAIRPERSON invited the members of the Committee to ask questions on section II of the report, dealing with the definition of the child.

3. Mr. KOLOSOV asked why the Moroccan Government, in paragraph 3 of its core document (HRI/CORE/1/Add.23), gave statistics for the population under 15 years of age, whereas the age of civil majority in Morocco was set at 20 years. Furthermore, in paragraph 35 of the report (CRC/C/28/Add.1) the Gregorian calendar was employed in the definition of the status of abandoned children and he would like to know whether that calendar was also used to determine the age of civil majority, as referred to in paragraph 34. Lastly, the Convention provided special protection for children under 18 years of age and he sought clarification about the treatment of children aged between 18 and 20 years, in view of the fact that Morocco had not made a declaration extending the protection afforded by the Convention to young people who had attained the age of civil majority. In practice, did those young people receive the same protection as other categories of the population?

4. Miss MASON asked the reason for the difference between the age of majority for criminal matters, which was set at 16 years, and the age of civil majority, which was 20 years. She would like to know whether children between 16 and 18 years of age were treated as adults in criminal matters. There were disparities in the rights recognized for boys and girls, and she wondered on what grounds that distinction was made. In her view, the difference in the legal age for marriage (15 years for girls, 18 for boys) also constituted negative discrimination against girls. The Government's replies indicated that, on marriage, a girl automatically obtained emancipation. Did that mean that she enjoyed all the rights connected with civil majority, including the right to vote? Lastly, was there any pressure group working specifically to have the legal working age raised from 12 to 14 or even 15 years?

5. Mrs. KARP, referring also to the question of the age for marriage, drew attention to the negative effects that premature marriage might have on young girls, in particular withdrawal from school, interrupted development or early pregnancy. She would like to have information on the number of girls married at 15 years of age or earlier, in view of the fact that derogations were possible with the permission of a judge or religious authority. What steps were being taken to change attitudes in that regard? On the question of health care, she noted that in Morocco a minor had to obtain the consent of his parents before consulting a doctor. There were cases where direct and personal guidance was necessary, for instance in matters relating to sex or

drugs. She would therefore like to know whether any counselling services were available to meet such needs and whether it was planned to lower the age at which the consent of the parents was obligatory to 15 or 16 years.

6. Mr. BENJELLOUN TOUIMI (Morocco) said that the amendment of the Code on Personal Status (moudawana) lowering the age of civil majority from 21 to 20 years had been extensively debated. During that debate, many speakers had called for the age of majority to be set at 18 years. The current age had been deemed more reasonable, however, in the light of Morocco's situation. Nevertheless, in criminal matters, the treatment of a 12-year-old child would obviously not be the same as that for a child of 16 years of age. It was for the judge to assess criminal responsibility bearing in mind the offender's age, as was the practice in other countries. As far as medical consultations were concerned, Morocco was certainly endeavouring to adapt to changes in society, but its economic difficulties meant that it had to focus on a limited number of priorities. An encouraging sign, however, was that civil society was clearly playing an increasing part in addressing modern problems to mitigate the Government's inadequacies in certain areas.

7. In reply to the question from Mr. Kolosov, he said that the Gregorian calendar was used to determine the age of civil majority, as well as all other legal ages in Morocco. The fact that the age of majority had been set at 20 meant that any non-emancipated person below that age was considered as a minor, with all the legal consequences that involved. In that regard, the national legislation followed a number of the provisions of the Convention.

8. Mr. MOSLIH (Morocco) said that the national legislation defined the age of responsibility in various matters for specific purposes. Thus, the age of civil majority was set at 20 years in order to protect the child, as it was felt that before that age a child was not sufficiently mature to look after his own interests, particularly in financial matters. The age of criminal responsibility had been set at 16 years to protect society's interests. Regarding children under 16 years of age, the provisions of the Convention and those of national criminal law were identical. As for children between 16 and 18 years of age, article 14, paragraph 2, of the Code of Criminal Procedure contained a provision whereby the judge could grant such children - depending on their personality and the circumstances of the offence - the same treatment as minors under 16 years of age. Lastly, the legal age for marriage had been set at 15 years for girls because that corresponded approximately to the age of biological maturity, which was earlier for girls than for boys. In practice, girls married much later, after 20 or even 30 years of age. Marriages at 15 were very rare. A minimum age had been set with a view to protecting girls in rural areas, who had often married at the age of 10 or 12.

9. Mr. HAMMARBERG noted that current Moroccan legislation allowed for the possibility of marriage at 15 years of age and that, as had been pointed out at the International Conference on Population and Development held at Cairo, might constitute a factor of discrimination against girls. The concept of biological majority, which was itself now being called into question, was not the only consideration. To be a mother, a girl also had to possess the social and psychological maturity needed to bring up a child. Any change in that regard was obviously a delicate matter, but he believed that the social message of legislation was an important factor in development.

10. Miss MASON said that she wished to revert to the provision whereby a girl automatically acquired emancipation on marriage. Did it follow that she obtained civil majority immediately, or would she have to wait until she had reached 20 years of age? If the Government were to raise the minimum working age to 15 years, would it at the same time consider ratifying ILO Convention No. 138 concerning the minimum age for admission to employment?

11. Mrs. KARP noted that 90 per cent of girls who married before the age of 18 were from rural areas. That indicated that there was need not only for an amendment of the law relating to marriageable age, but also for campaigns to raise awareness, particularly in the countryside. On the subject of health, she wished to raise the question of pregnant girls who were forced to marry. What happened to those of them whose health would be endangered by childbirth, and whose parents refused to allow them to have an abortion? Was it their health or the wishes of the parents that prevailed?

12. Mrs. SARDENBERG said that, in order to overcome the discrimination against girls which derived from tradition, religion or the difference in levels of education between the countryside and urban areas, efforts to modernize Moroccan society and harmonize its legislation should be continued. She asked whether the Government had undertaken any studies to find out how society would react to far-reaching reforms.

13. Mr. BENJELLOUN TOUIMI (Morocco) said he recognized that boys and girls were not treated in exactly the same way in his country, but social change was nevertheless taking place. In 1958, Moroccan law on personal status and succession had been extensively amended, while still taking account of Islamic law, despite the reservations of society in general. Today, the Human Rights Advisory Council was calling for the age of admission to employment to be set at 15 years. Such progress was very small but it did exist, even if legislation relating to the child did not yet fully conform to the provisions of the Convention. While agreeing with the Committee that society should be encouraged to address children's issues if it was to move forward, he wished to stress the need to take account of existing traditions.

14. Mr. HAMADI (Morocco) said that in health services, in both the public and the private sector, general practitioners, gynaecologists, endocrinologists, dermatologists and paediatricians, as well as trained paramedical and nursing staff, all gave children information on matters concerning sex. In addition, there were public information programmes in Morocco on that subject as well as concerning AIDS prevention.

15. In Morocco, drug addiction was not a scourge. The service responsible for mental and degenerative disease control in the Department of Epidemiology and Disease Control of the Ministry of Public Health was conducting a national action programme. In addition, the National Committee for Drug Addiction Control was represented in every prefecture in the Kingdom. It was under the direction of the prefect, the health authorities and local authorities, and met weekly. The King had recently established a development agency for the northern region, which would support the Ministry of Health in the prevention of drug abuse. Furthermore, the hospital system, the school and university

health and diagnostic centres, and local centres, where people could ask for information while remaining anonymous, were all taking part in the fight against drug addiction.

16. Abortion was prohibited in Morocco. However, termination of pregnancy for therapeutic reasons, when the life of the mother was in danger, was a medical obligation. Single girls who were expecting a child without their parents' knowledge could receive medical attention and give birth free of charge in health centres. They would then be encouraged to keep the child. If they preferred to give up the child, it would be taken into the care of public bodies, such as the Moroccan League for the Protection of Children, which would arrange for its adoption.

17. The CHAIRPERSON welcomed the Moroccan delegation's willingness to engage in dialogue. However, it should be pointed out that the Committee wished to know not only about what progress had been made in the implementation of the Convention, but also about what difficulties were being encountered in that respect by the Government, so that it could make useful suggestions. There was thus a need for a spirit of self-criticism. Islamic law, under which the principles of Islam applied at all times and in all places, was occasionally difficult to reconcile with the provisions of the Convention. That was the case with the law on succession, which determined the proportions of an inheritance to which boys and girls were entitled. Thus, taking account of the best interests of the child and of the principle of non-discrimination was no easy task in matters of succession, but it should be recognized that, in other fields, the Governments of Islamic countries had more latitude.

18. The Committee could make useful suggestions as to how the Moroccan Government might speed up the process of legislative reform currently under way. There was also need to change society's attitude to children, and more public information and awareness-raising campaigns should be therefore carried out with a view to improving the situation of women, and hence of children.

19. She invited the delegation and members of the Committee to take up the questions on the list of issues relating to general principles and civil rights and freedoms.

20. Mr. KOLOSOV, referring to paragraph 3 of the core document (HRI/CORE/1/Add.23), said that he would like information on the number of inhabitants of Morocco under 20 and on budgetary appropriations for that age group.

21. Mr. HAMMARBERG remarked that the replies given in the report on the subject of non-discrimination were very brief. Referring to the reply to question 13 on the list of issues (CRC/C/Q/MOR.1), he noted a difference of treatment between boys and girls in the field of education, to the detriment of girls marrying early, who risked having to give up their schooling. Also, children living in rural areas did not have the same opportunities for access to education as those in the towns. He would like to have information on disabled children and on the steps being taken by the authorities, particularly at the local level, to give them an education and to change public attitudes towards them. In his view, far-reaching and systematic campaigns should be launched to raise public awareness in that area; no such

campaigns were mentioned in the report or in the replies. Lastly, on the subject of the best interests of the child, the Convention aimed in particular to protect children when economic interests or the interests of the parents or of national security ran counter to the welfare of the child. That should be a basic concern of the Government and reflected in its budgetary policy.

22. Mrs. KARP said she found that girls in Morocco were not treated on an equal footing with boys. The statistics on literacy gave her the impression that there were two different countries, rural Morocco and urban Morocco. She would like to know what policies and strategies had been put into effect to remedy the disparities in that regard.

23. Children born out of wedlock did not appear to have the same rights as other children. However, she was pleased to note that, following an amendment of the legislation, the fact that a child had been born out of wedlock was no longer stated on its birth certificate. She would like to know what further steps the Government was planning to take to change attitudes, in keeping with the spirit of the Convention. The delegation could perhaps quote specific cases in which the best interests of the child had been at variance with the interests of the parents, and how the courts had interpreted the Convention. She also asked what was being done in Morocco to take into consideration the views of the child and to raise public awareness in that regard. Lastly, could children exercise their right to privacy within the family?

24. Mrs. SARDENBERG, referring to the reply to question 12 on the list of issues, said that she would like to have more information on data collection systems, and on how the authorities used such data to formulate effective policies. She welcomed the measures taken to implement the general principles set forth in the Convention, but felt that they should be better integrated with a view to combating discrimination against girls in rural areas and against children of disadvantaged families. She would encourage the Government to apply the strategies proposed by UNICEF in that area and to demonstrate more clearly, at the political level, that it regarded the rights of children as a major priority.

25. Miss MASON said that the Convention allowed every country to preserve its culture and traditions, and that the Committee sought to promote conformity with the provisions of the Convention rather than uniformity. The Convention was an innovative text in no way designed to weaken parental authority, but aimed rather at helping parents to give their children a better preparation for adult life.

26. She asked whether the views of the child were taken into consideration only in the judicial sphere. In that regard, she would like to know whether steps had been taken to make people more aware of the need to prepare children for adulthood and to take account of their views, and how the people reacted. Could the delegation give additional examples, besides those cited in the report (CRC/C/28/Add.1), of cases in which the views of the child had been taken into consideration in the courts? In the case of abandoned children, were the views of girls taken into account in the same way as those of boys at the time of adoption? Did the authorities encourage children to help one another, particularly in the most disadvantaged rural areas?

The meeting was suspended at 4.35 p.m. and resumed at 4.45 p.m.

27. Mr. BENJELLOUN TOUIMI (Morocco) said that the Moroccan authorities would endeavour in the future to provide statistics on children aged between 15 and 20 years, i.e. those not having reached the age of civil majority. The statistical services had made considerable progress and a large amount of data could now be obtained through Internet. As in other developing countries, there was some inequality between urban and rural areas, which affected not only children's rights. In that regard, Morocco had adopted a strategy which was defined in the UNICEF country programme. The aim of the recent constitutional amendments was to create decentralized areas enabling local populations to resolve their problems more easily.

28. With regard to the best interests of the child, the innovations brought by the Convention had to be examined carefully to avoid the risk of weakening parental authority and giving the impression that traditional values were being called into question. The Moroccan authorities were endeavouring to publish and study the case law of the courts at all levels, but much still remained to be done. UNICEF was acting as a catalyst in encouraging all ministries to ensure that children's interests were taken into account in decision-making and in the budgetary process.

29. The Government was endeavouring through education to give children the means to exercise their rights. With that object in mind, it had requested the World Bank to make a study of education in Morocco. Television programmes, often produced locally, were broadcast to raise awareness among parents and children. On the question of children's privacy, economic problems and consequent overcrowding meant that the issue of privacy was not one of the foremost concerns of the population.

30. Mr. BENMAKHLOUF (Morocco), responding to the questions raised concerning the best interests of the child, said that, although not very clearly defined in the Convention, those interests were taken into account in the management of the child's assets by the parents or legal guardian. Children born out of wedlock were recognized by the law and had the right to a name.

31. While no law allowed discrimination of any kind on the grounds of sex, ethnic origin or religion in access to health-care services, education or culture, there was de facto discrimination between the countryside and the cities. The Government and non-governmental organizations had for some years been exploring ways of preventing that gap from growing wider. According to a study of education in rural areas, the rate of school enrolment for girls was higher than in 1992-1993. Raising the enrolment rate in rural areas meant not only building schools, but also establishing infrastructure. In that connection, cooperation with UNICEF had led to a number of projects, including a water supply project that would make it possible to stabilize the population and provide the necessary facilities.

32. Mr. DINIEL (Morocco) said that, according to a study made following the ratification of the Convention, 84 per cent of villages had schools within a 2.5-kilometre radius. Furthermore, a study carried out with the assistance of UNICEF had shown that only 14 per cent of the population gave the remoteness

of schools as a reason for the non-attendance of girls. Some parents needed their daughters' help and others simply did not want them to go to school.

33. Far from being responsible for that situation, the Moroccan authorities had endeavoured, even before ratification of the Convention, to establish the necessary infrastructure in rural areas. A commission charged with studying this problem of school attendance and combating illiteracy among girls had found that virtually 100 per cent of girls had been enrolled in schools in the cities, as against 45 per cent at most in rural areas. It had instituted a strategy aimed at adapting the schooling of girls to traditions, and school curricula to the needs of the population. The Government had adopted an integrated strategy that was being pursued with the assistance of non-governmental organizations, many of which were subsidized by the various ministries. Meanwhile, the development of rural areas was taking place within the framework of decentralization. The strategy adopted by Morocco was reflected in the various programmes and plans of action formulated with the assistance of the World Bank and other international organizations.

34. Mr. TYANE (Morocco), replying to the questions on health statistics, said that Morocco carried out regular censuses and surveys to determine the main national socio-economic indicators. The various ministerial departments also conducted surveys for the purpose of better targeting their activities. During the 1980s, the health information system of the Ministry of Health had been fully modernized to permit better monitoring of the implementation of programmes with particular reference to maternal and child health.

35. The authorities were also making use of regular statistics to monitor health programmes at the provincial and national levels. The information was processed, and beginning to be decentralized, by reason of computer systems. The central bodies responsible for the management of maternal and child health programmes was integrated in an information exchange network and connected to Internet. Surveys on fertility, maternal and child health and family planning had been made periodically since 1979 and the results were given at the rural, urban, regional and national levels. A survey at the provincial level was due to be held in 1997 and would focus on the situation in rural areas, covering 45,000 households. Qualitative as well as quantitative surveys on specific aspects of maternal and child health, such as the epidemiological situation, were also being carried out with a view to improving health services and programmes and adapting them to the needs of the population.

36. Information gathered in the field showed that Morocco was in a situation of social transition. According to the most recent survey, for example, the median age of marriage had increased to about 20 years, a development that mitigated the problem of early marriages. Likewise, the age of first pregnancy had risen appreciably since the 1970s and 1980s, reaching 23 years on average, a trend that reduced the risks to the health of mothers and children and improved their chances of survival.

37. Such information enabled the public authorities to target their programmes of action better with respect to priority, and particularly rural, areas. In the 1996-1997 Finance Act, for example, 45 per cent of appropriations in the budget of the Ministry of Health were for rural areas. Some 400 doctors had been recruited and assigned to rural areas, and 157 new

health centres were making it possible to provide basic health services locally to approximately 1.5 million people. The public authorities had provided the health services with 200 vehicles to help them improve coverage of some 38,000 villages spread across the country. They were also endeavouring to provide information, education and communication services as a matter of priority both to inhabitants of remote rural areas and to people in disadvantaged outlying urban areas.

38. Mrs. KARP said that she would like to know more about the Government's strategies to bridge the gap between rural and urban areas in Morocco. What specific measures had been taken, in particular at the budgetary level, and what strategy had been defined to provide for the decentralization of services? Concerning the dissemination of information, she asked whether the results of the survey made by the National Congress had been published and whether they had been communicated to the relevant ministries.

39. On the question of housing, it was essential to ensure that a child's right to privacy was exercised in practice, in accordance with the Convention, and she would like to know what specific measures had been taken by the Government to safeguard the enjoyment of that right.

40. The CHAIRPERSON said that the trend towards a higher age of marriage in practice was conducive to the adoption of legislative measures to raise the legal age for marriage. Such a measure would contribute to protecting the best interests of the child, and particularly the health of young girls.

41. Regarding the decentralization of health services, she invited the Government of Morocco to draw on the successful experiences of other countries which had faced similar problems owing to the geographical spread of their population. It might, for example, make use of mobile teams and put in place light structures that would enable it to provide locally for the needs of people in remote rural areas.

42. Lastly, she would like to know whether children had the possibility of forming associations with a view to exercising their right to freedom of expression and to participate in decisions affecting them, particularly in schools.

43. Mr. BENJELLOUN TOUIMI (Morocco) thanked the Committee for its comments and recommendations, which would be helpful to his country in better targeting its programmes and strategies. Ever since the 1970s, the Moroccan authorities had been placing emphasis on decentralization, in particular by setting up local ministerial services and decision-making bodies. The Chairperson's suggestion to align the legal age for marriage with actual practice seemed pertinent. However, he wished to point out that reforms in that area should be planned with great care to avoid any negative reactions among the population in view of Moroccan traditions, especially religious tradition. Observing that well-meaning but perhaps hasty policies of modernization had caused hostile reactions in some neighbouring countries, he asked the Committee to bear in mind that Morocco belonged to the Mediterranean, Islamic and African world, and to encourage it to move forward progressively but prudently, even if practice was ahead of the law in matters such as the age of marriage.

44. Lastly, it should be noted that there were mobile health units in Morocco. Children had the right to form associations and exercised their right to freedom of expression in schools with the assistance of some non-governmental organizations, including within the framework of leisure activities.

45. Mr. TYANE (Morocco), referring to the question of strategies concerning rural populations, indicated that the three-year plan for 1978-1980 had given the authorities the opportunity to examine the full range of health problems and to offer solutions taking account of available resources and actual conditions in the field. On that basis, the strategies proposed in the various programmes of action had been entirely revised and additional strategies had been formulated. They had yielded remarkable results, in particular an immunization coverage rate of around 90 per cent and a rate of contraceptive use of about 50 per cent. The various strategies put into effect were complementary, for example combining the establishment of mixed infrastructures (health clinics, hospitals and units for rural delivery care) in heavily populated areas with mobile strategies (itinerant nurses, mobile teams) in underpopulated areas. Furthermore, drawing on local resources, the authorities had begun in 1981 to include traditional birth attendants in public health care through training and awareness-raising programmes. However, those mobile strategies were not an end in themselves, but alternative transitional solutions that would eventually have to be replaced by a more conventional health-care infrastructure.

46. Mr. DINIEL (Morocco) said that the results of the survey to evaluate the situation of children in 1993-1994 had been communicated to the relevant ministry and to the King himself. They had, in addition, been made available to all associations in the country concerned with the situation of children and had been updated, particularly in respect of matters relating to education and culture.

47. With regard to information, programmes aimed at raising awareness of specific issues affecting the situation of girls in daily life were broadcast on television, in particular with a view to promoting school attendance of girls by encouraging families to reduce the domestic tasks with which they were entrusted.

48. The CHAIRPERSON noted with satisfaction that a positive dialogue had been established between the Moroccan delegation and the Committee and that the delegation seemed to appreciate the need to harmonize programmes specifically concerning children with national development programmes. She was pleased that the delegation recognized the merits of raising the age of marriage, notwithstanding the difficulties which appeared to stand in the way of such measures. A change in the legal age for marriage would, of course, require accompanying measures to prevent negative reactions of the kind that had resulted from modernization efforts in some neighbouring countries. The situation in Morocco seemed rather favourable, in her view, to such change.

The meeting rose at 6 p.m.